MSFC ISO REGISTRATION AUDIT SCRIBE NOTES - Feb 98'

THIS AUDITOR'S MAIN FOCUS WAS ON ISO ELEMENTS: *

4 - DESIGN CONTROL
11 - INSPECTION, MEASURING & TEST EQUIPMENT
14 - CORRECTIVE AND PREVENTIVE ACTION
17 - INTERNAL QUALITY AUDITS

*** Other generic issues were discussed as appropriate during the audit, (i.e., Quality Policy, Management Representative, etc.)**

Date: Feb. 26 - 28, 1998
Auditor: Auditor #2 (N)
????? - sanitized , replaced an individual's name

ISO Element: 11 - Inspection, Measuring, & Test Equipment

Auditee Organization Code: EP93 (Measurement Systems Branch)

Building 4583

N: Asked policy and title of A1 as exited building for test area. A1 responded with policy and title.

N: (moved outside to test stand) Pointed out and asked what a specific piece of equipment was?

A1: ...Transducer

N: Asked about tracking tags.

A1: Showed tags. Stated calibration number and NEMS number was on the transducer. Stated calibration data is entered into database.

N: What are calibration categories? 1, 2, 3, 4, 5?

A1: Not sure what was being asked.

N: What is category 2?

N: Would you look at label? How would you know what is category 1?

A2: He receives notification to do calibration. He does not decide the category.

A1: I calibrate the BSU every morning not the transducer.

A2: The calibration of the transducer is periodic. Our data base can be cross referenced to checkout the number.

N: What is the serial number?

A1: NEMS number is M625005

N: What is in this cabinet (pointing to a rather large gray cabinet)?

A1: Computer that goes to a computer room hookup.

N: (moved back to ground level with)What is the procedure?

A2: MSP says by category 1, 2, 4, 5

N: (moved to outside of building 4522)

N: Did they tell you what I want to see?

A3: Calibration instruments

N: We would like to look at tags, ground floor and up.

A3: Tests on ground floor not baselined.

N: Any other equipment not being used?

A3: Some may be back in a few months. We check when they come back.

N: Do you know the calibration levels?

A3: Yes

N: What about levels 1-5? Do you know the difference?

A3: Yes

N: How do you determine the category?

A3: My judgment and whether field or calibration lab is best.

N: Can you get from facilities without going through going calibration?

A3: Caldwell is the calibration contact. Everything goes through him.

A1: (introduces support technicians)

N: What is the quality policy?

A4: Responded with quality policy.

N: How do you do your job?

A4: We document calibration, write TPS and send through approval process.

N: Do you maintain calibration log?

A3: Everything is minimum of 1 year.

N: What is this? (pointing to a piece of equipment)

A4: Detection system

A3: This is a hydrogen detection system and is calibrated in place every 6 months.

N: Do you keep records?

A3: Yes

N: Where? Here or in office?

A3: Back in the office.

N: Asked to see different categories (this was in electrical equipment, building 4522)

A3: Showed M65396 NEMS No. Category 1, Transducer, pressure

N: What's going on with the Hewlett-Packard? What category?

A3: Category 4 - not been used in a while.

N: What does this tag mean? (pointing)

A3: Equipment checks functional range accuracy, used for adjustable frequency ranges. It can operate chart amplifier.

N: Anything that's calibrated "in place?"

A3: H2 detection system. To calibrate you put a known sample of gas (with H2) in canister.

N: Are they tagged?

A3: Have written on them 2% LEL.

N: (N, A3, and escort climb tower to second floor of stand 500) What about this transducer? (pointing)

A3: No. TMG33379

N: (Points to another) Does that have calibration due date?

A3: 10/8/98 - M627812 due date 10/9/98

N: Can you access the recall system from here?

A3: No

N: (N, scribe, and escort returned to building 4583) Asked to see specific transducer numbers in data base. Asked for M625005

A5: (entered number) Due date is 12-2-99.

N: What about Hewlett Packard(?) Due date of 93. (gave A5 number 2151A 18002)

A5: Calibrated in 93. Did not show calibration cycle.

N: What category of equipment?

A6: Category 5

N: Means what?

A6: Not for temperature data, only for measuring frequency.

N: A835ERC?

A5: Doesn’t show up.

N: It had a limited calibration tag. Showed calibration due date of 7-23-98.

ISO Element: 4
Auditee Org: ED

Auditee: Deputy Lab Director - ED Lab

A: I understand that you are interested in a CDR maturity level Project in relation to ISO element 4 - Enhanced Data Acquisition System (EDAS) - we have made some changes in the process as a result of ISO

N: What changes?
A: Stress analysis document - there is different distribution - that's really the only substantive change - Our memo system serves as a quality record.

N: Do you have an organization chart?
A: Yes, copy provided and functions of each major organization block discussed.

N: What kind of reviews?
A: External are formal reviews and other reviews on an informal iterative process. Typically, on drawings 3 signatures are obtained - Materials lab, designer, and stress - stress coordinates with thermal and ?? for structural aspects.

N: Are they checked for goals of program by each of the 3.
A: No, these checks are more at the discipline areas rather than system areas - there is another review done on the system and additional coordination at the system level.

N: What is the mechanism to flow design requirements?
A: Systems requirements document which has participation from all form reviews. Requirements review may or may not be a board.

N: If there are questions, does the board have to be convened.

A: It depends - PMC authorizing council - relatively new process initiated under Project Light - PRR forms the requirements

N: How do PRR and PMC relate?

A: PMC turns project on and names formal lead, then that person (typically Project Manager) and the Chief Engineer identify and coordinate at the various tiers in the process - there are milestone reviews (e.g., PDR, CDR, & DCR) - the paper is reviewed and in some cases analysis done, if required at those reviews. Verification tests, FRR at center, FRR at KSC, and independent safety reviews are also done.

N: Who is involved in the actual planning?

A: With ISO - Project identifies critical milestones, Chief Engineer looks for lab responsibilities - Task Agreement established between the project and the lab (still underway with plans to complete by 10/1/98) - labs look at tasks and milestones - flesh out in terms of resources, travel, equipment, subcontracts, people - lab and project reach agreement and formally sign the task agreement - signatures of Project Manager, Chief Engineer, and Lab Director - a lot of coordination is required. In this lab, we have propulsion and payloads leads - there are weekly meetings with leads on technical, resource, and schedule issues - issues are then raised to lab management.

N: Based on meetings, are changes made to task agreements?

A: Task agreements are reviewed every 6 months.

N: Have you done one yet?

A: Yes and no - explanation - we look at which projects we can/can't support.

N: Can the adjustment be made within the team or task agreement?

A: It can be - sit down with division/branch and look for resources that might be available.

N: How do people at lower levels understand organizational and technical interfaces? Are there flows?

A: It varies depending on the task. For example, Guidance and Control work very closely with EB and in fact are co-located together. Stress works closely with EH. We have PDTS - at the discipline level - close coordination is required - Chief Engineers serve as stewards of some of the coordination.

N: What's "walking around" sense?

A: Common sense

N: Who handles paper trail?

A: Lab level 4 documents define quality records and the maintenance of those quality records. There is also a configuration control process that extends beyond the lab. Typically in this lab, we use the memo system, which are our quality records.

N: Do you have a copy of a task agreement?

A: No, they are being worked now and will be in place by 10/1/98. Prior to ISO, as an example, we had a very generalized agreement with the SRB office. Now we have established a new work single point of contact and a database for keeping track of task agreements.

N: Let's go talk to that person.

ED - 4610

Auditee (A1) - New work single point of contact

Auditee (A2) - Deputy Lab Director

N: What's your title?

A1: Technical Assistant to the director

N: Did you create the database to keep track of records?

A1: We use to manage not just track - Use Filemaker Pro

N: Is it on the server or standalone?

A1: Server with "Read/write" privileges - Computer demonstration of database performed.

N: Who has edit privileges?

N: Who can change?

A1: The only that can change the formal task agreement is the lab director.

N: How do you access the formal agreements vs. those in the review cycle? How do you tell the difference?

A1: They will be in separate databases.

A2: Hardcopy records are also maintained.

A1: PTA1 Fast track agreement shown and screens and fields described.

N: Where do specific requirements come from? - Still looking at computer.

A1: In the detail.

N: Are you going to be maintaining all of this?

A1: Yes

N: (Looking at other features of the database) That's good - great document (print out of report)

A2: Showed old method - hardcopy of form - Specifically looked at EDAS agreement - Manpower resources looked at by cost code every 2 weeks - then a monthly assessment check by projects.

N: Who keeps these?

A1: New Work Single POC

N: Is that (a document they were looking at) in the system?

A2: No, it's obsolete

N: Does the system include maintenance of obsolete documents?

A2: No, we are deleting the obsolete documents. Description of task agreements - Project provides cost codes - labs can't work without the cost codes - plan for a clean changeover

N: How long do you keep?

A1: Length of project plus 1 year

N: Do you have a work instruction in place on archiving?

A2: Yes, level 4 instructions

N: Who maintains the signed agreements?

N: If you don't migrate old documents, how are they maintained?

A2: Past agreements have been by FY, so there will be a formal transfer at the beginning of next FY which will cover this.

N: What is the Quality Policy?

A1: Stated 1st part

N: Is it on back of badge?

A1: No, I know it.

Went to Division Chief's office - he wasn't there, but while there auditor noticed a notebook with ISO 9000 on it.

N: What kind of notebook is that?

A2: Discussed that it was a notebook they had provided to every employee as a training tool and the contents of the notebook.

ED - 4610

Auditee (A1) - Structural design engineer

Auditee (A2) - Deputy Lab Director

N: What's your title? Do you work EDAS?

A1: Structural design engineer, yes

N: What's the quality policy?

A1: Stated it.

N: How do you implement it in your job?

A2: Use the MQM

N: Who do you go to with questions?

A1: Supervisor/team lead

N: Where do you get your requirements from?

A1: Team lead - broader from New Work POC

N: By what means?

A1: Word of mouth

N: What document do you get requirements from?

A1: Project plan or implementation plan

N: Is there one form EDAS?

A1: Implementation plan

N: May I see it?

A1: Searched and finally found it

N: What's the date?

A1: 2/20/98

N: Where did you get this copy?

A1: Through distribution

N: How long do you keep?

A1: As long as I want - it's not my quality record

N: Who develops drawings?

A1: In ED, I'm the only one.

N: Who reviews the drawings?

A1: Checkers - use MSFC-STD-555

N: How do you know who reviews?

A1: Part of team

N: Do you have the tools you need to do your job?

A1: Yes

N: How do you relay that you need additional tools?

A1: Discuss with my management and then generate a request.

N: Who else reviews drawings and do they sign them?

A1: Mfg., stress, checkers, supervisors - double check - the CM Plan defines who must review.

N: Have you started any drawings on EDAS?

A1: Yes

N: Show me one

A1: Did so

N: Pick a requirement in the requirements document and show it to me on the drawing.

A1: Showed parts traceability

N: Where do you get actual specs?

A1: I pick and choose them

N: What is this enclosure?

A1: Described the enclosure and its purpose

N: Where did you get the mounting requirements?

A1: From vendor drawing

N: Who supplied them?

A1: Vendor

N: How do you know it's the latest?

A1: Requested the latest from the vendor

N: What do you do with vendor drawings?

A1: Maintain, but not required to

N: How do you handle a design change?

A1: Provide drawing changes to vendor

N: Has this drawing been approved?

A1: Yes, signatures discussed and has been through release desk

N: When do you fill in this part of the drawing (Rev blocks)?

A1: 555 document defines when Revs are required

N: What is the release date?

A1: 8/27/97

N: Are you the only making changes?

A1: Yes, must reserve EO number from release desk

N: How do you track changes and were there changes during the review process?

A1: Stress had a lot of input

N: How were these conveyed?

A1: Verbal

A2: At formal reviews, there is a formal RID process

N: Are you preparing for a review now?

A1: No

N: Has a PDR been held? Where are the records from it?

A1: Yes, Chief Engineer maintains

N: Did you participate?

A1: Yes, presented the design

N: Need to go to Chief Engineer next to see those records.

N: Show me another requirement

A1: Did so

N: Is there a formalized process with the vendor?

A2: Depends on whether it needs to be formalized - if it's a contract, then there is a formalized process

N: How do you do acceptance if changes have been made?

A2: If discrepancy then IAR - different levels of inspections depending on requirements

N: Do you have the preliminary kick-off document?

A2 Records from PMC, verbal direction from team lead, then verification by time card certification

ED - 4610

Auditee (A1) - AST Structural engineer - Stress

Auditee (A2) - Deputy Lab Director

N: Title?

A1: AST Structural engineer - Stress

N: How long have you been with NASA?

A1: 13 years

N: How do you get your requirements?

A1: I'm a stress analyst - have 2 inputs - load and geometry - verify the stress against the design criteria - use STD-505A which has since been replace by STD-5001

N: What requirements flowed down to you?

A1: Systems requirements document includes references to the documents or standards I am to use.

N: Do you have input on requirements document?

A1: I'm asked questions

A2: Restated question

A1: I integrate and make sure the stress issues are covered

N: How do you receive them?

A1: PDT or implementation team

N: Do you have access to the task agreement database?

A1: No, but I would if I were a project task lead

N: Who gives you your assignments?

A1: My supervisor

N: Have you gotten any new assignments since ISO 9000?

A1: No

N: Show me a requirement in the requirements document and the analysis that was done.

A1: Showed factor of safety example

A2: Reminder of change discussed earlier regarding distribution change

N: Where in the procedures are requirements described?

A2: ED OWI - work instruction

N: Can you show that to me?

A1 and A2: Showed on the computer the document and specific requirements in the document.

N: What ISO training have you had?

A1: All the mandatory training

N: Was it effective?

A1: Yes, especially to understand the history of it and how we've gotten to this point.

SA - 4202

Auditee (A1): SRB Chief Engineer

Auditee (A2): Boeing NA employee

Auditee (A3): EDAS/subsystem manager

Auditee (A4): Shuttle Configuration Management POC

N: Your office maintains PDR and CDR documentation?

A1: On EDAS, we elected not to perform PDR and CDR - implementation plan addresses that

N: What documents do you maintain?

A1: Requirements document, certification document, configuration management documents, and implementation plan

N: Do you have the configuration management and implementation plans?

A4: Yes, in another office.

N: May I see them?

A4: Yes

N: What documents that PDR and CDR aren't required?

A1: Configuration Management Plan

N: I notice you have a book entitled "Release Drawings" - why?

A2: For reference

A3: We are on distribution and just keep a copy.

N: Why do you keep?

A3: Engineer - We do verify that it is the latest version by checking the master file

N: What is your involvement?

A4: Wrote and maintain the Shuttle ISO documentation

SA - 4202

Auditee (A1): Configuration Management custodian(?)

Auditee (A2): Shuttle Configuration Management POC

N: What is the quality policy?

A1: Stated it.

N: How do you do excellence in your job?

A1: Explained

N: If you have a question, who do you go to?

A1: My team lead or supervisor

N: Do you have procedures or work instructions for your job? Why are you pulling hardcopy?

A1: Showed the original

N: Asked to compare her hardcopy master list to the one on the computer.

A1: Did so - was the same

N: What is the approval cycle before you accept as a quality record?

A1: Described in the document control procedure

N: This one was “signed for” - what tells you that this person had that authority?

A1: She would ask supervisor

A2: There was a letter delegating signature authority - we can get a copy from front office if you want

N: Show me in the implementation plan where the requirement for PDR and CDR was eliminated.

A2: Did so

N: Do you have the configuration management plan? Can I see a copy?

A1: Showed it to him.

N: Commented on quick review and approval of document

A2: These people are all in close proximity, so it was walked through for signature.

N: How long do you keep old versions?

A1: 2 years

N: Can anyone get the official copy if you aren’t in your office?

A1: No, keep in a locked cabinet - do have an alternate

N: Are you involved in the configuration management process?

A2: We maintain the documents and master-list of documents that are under Shuttle control, specifically the Business OWI, Chief Engineers OWI, Integration OWI, and Document Control OWI

N: Who is ISO Management Representative at MSFC?

A1: Bob Schwinghamer

Auditee Org Code: GP20

Building: 4201

N How is “Contract Performance Information System User Manual” document controlled?

A Sole access to it. Manual not given to anyone else. Physically restricted to one machine. Marina is Backup.

N Is doc considered internal or external?

A Internal. Not OWI, because only one person uses it.

N Went to office to see how the machine’s access is controlled.
Office was locked. Machine/database requires password.
Concerned that document is not controlled in same manner as other QMS documents. Concerned because the document/database contains important information thus it needs to be controlled.

Interview of Backup:

N Where would you go to find instructions and database ?

A I would go to this machine, since there are no other copies of instructions or the database on any other machines.

N What is the Quality Policy?

A Recited policy in their own words.

N Where do you go to find current procedures?

A Master list on web.

N Who is Mgmt Rep?

A Mr. Schwinghamer.

Auditee Org Code: N/A

Building: 4203

Review and closure of pre-assessment audit NCR's

N Reviewed organizations use of statistics. Checked document changes.
Only two orgs are using statistics in scope of ISO. S&MA is good example.

N Reviewed extensive changes to Configuration Management procedures.
Reviewed objective evidence on status of all projects.
Has there been any training on the document changes?

A No. Most of the people involved in CM participated in the document revision process. Fast Trac is a good example.

N Will do followup audits with Fast Trac and X34 to determine if CM changes are understood and implemented.

N How do you do root cause analysis on NCR's?

A Look for trends and generate QSDN. Through questioning try to rule out symptoms and get to causes of the non-conformances.

N Reviewed NCR 14 and 15 procedure changes.

N Closed out all NCR's, but will do some follow up audits.

Auditee Org Code: RA (Fast Trac)

Building: 4203

N Who can we talk to about CM of Fast Trac?

A Fast Trac - ?????, STP - ?????

N What is the net effect of changes to CM on Fast Trac?

A Put together a CM plan and put it through CCB. We met with other projects to discuss changes and impacts. We reviewed the Fast Trac CM plan versus the new CM procedures and found no conflicts.

A There is no impact of the changes to CM procedures on X34 because the Design and CM is contracted out. Project started prior to ISO 9000.

Auditee Org Code: CR

Building: 4203

A Described new electronic NCR tracking system. Showed Quality Records for 1st two Internal Audits.

N How did you determine who performed audits?

A Stated the requirements for Lead Auditors. Do not use an auditor to audit their own organization. Showed records of who audited what, and lists of Lead and

Internal Auditors. Described how Lead Auditor plans and conducts an audit. Showed the CWI for doing internal audits.

N What technical expertise do LA have to audit a specific area?

A Within the limits of available resources an attempt was made to match a LA background with the area to be audited, but not easy with limited number of auditors. Therefore the CWI allows the LA to request technical assistance in areas they feel it may be needed.

N How long do you keep records?

A 3 years then shipped to repository for 9 years and then destroyed.

N How do you evaluate records before filing?

A I check them for signatures and completeness.

N Where are the certs for auditors kept?

A Training keeps the record.

N Are all LA & IA successfully trained?

A Yes.

N How do you use feedback from audits?

A If there was a poor feedback, I would investigate, and possibly generate a QSDN.

N Are there any work instructions for the database admin?

A No. The developer showed how and the database is simple to use.

N How do you verify someone if they request an account?

A I cross check with the Org Rep and possibly with the Audit Manager.

N Are there written procedures for how you verify someone?

A Yes. Showed the section in the OWI.

N Are there Backup procedures?

A Yes. They have an OWI.

N Are there recovery procedures?

A Not sure. They should be in OWI with backup procedures.

N Are previous audit results followed up?

A Not specifically required to do a follow up on each previous NCR during next round of audits, but the LA are required by the CWI to review the previous results and use them in planning of an audit.

N Pulled some example NCR's and reviewed them.

N IS NCR part of corrective action system?

A It feeds into a separate system. NCR's are screened by the audit manager and trends and systemic problems are input into the CAS so that they can be documented, tracked, and corrected.

N Does LA always look at previous audit results?

A Yes, it is part of the CWI. The details of how they do the review or how they document the review is not specified.

N Follow-up of previous audit results is required by standard. How are you collecting objective evidence that it is being done?

A Did not require that the LA document what follow-up they did on 1st round. Thus there is no concrete objective evidence in the audit reports that the LA reviewed and followed up on previous audit results. Will add an explicit requirement to the CWI.

N Will review some auditors to see if they reviewed 1st round audit results.

N Reviewed audit plan and audit report.

Demo of Electronic Audit System

N Who can change audit schedule?

A Only me.

N How do you decide who can enter root cause data into NCR system?

A Each organization has an ISO rep, and also they can designate others to help,and they are each given a password.

N Reviewed some open NCR's from the 1st and 2nd round internal audits. How do audit results fit into management review?

A Data, status, and trends are presented by the audit manager to the Quality Council. They can home in on trouble areas and take actions such as create tiger teams.

Interview of an auditor

N Asked them to log in to verify the screens were appropriate for their level of access.

A complied successfully

N What kind of training did they have to be an auditor?

A Took intense week long Lead Auditor course.

N Did you do any auditor-in-training audits?

A No.

N What other background do you have?

A Engineering.

A Explained how Internal auditors were trained with at least one day of following a trained auditor.

N How do you plan an audit?

A Explained steps.

N What happens when an auditee Point of Contact disagrees with you?

A Contact Audit Manager to resolve.

N Which checklist did you use?

A Modified generic.

N How did you develop your questions?

A Based on the org's documents and the QMS docs.

N How do you use previous round audit results?

A I get a copy of the NCR's for review to find areas to emphasize.

N How do you resolve disagreements over interpreting the standard?

A Consult with Audit Manager, and possibly with the MSFC ISO 9000 Management Rep.

N What Constitutes a Major NC?

A An NC which directly impacts the quality of the product.

N What is the Quality Policy?

A Stated policy.

N Is there anything in the policy concerning excellence?

A Yes , there are three ways we ensure quality. Reads them off of badge.

N How do you ensure excellence in your audits?

A Ensure that NCR's are well written and do not contain any ambiguous statements.

N Do you go back to same org and do a deeper audit?

A No, we chose to send LA to a different org second time to get a broader rather than deeper exposure.

N What is most and least favorite element?

A Hadn't thought of it that way. Sort of liked 4.9 because it is related to engineering.

Interview of 2nd auditor

N What is the Quality Policy?

A Stated it in their own words.

N How do you incorporate excellence into your audits?

A By being thorough.

N What do you consider verifiable evidence?

A Drawings for example. Gave example of a finding where procedure calls for specific info to be on the drawing and it wasn't there.

N How do you close out an NCR?

A Fill in block 7 on NCR form (online), which requires verifying the corrective action was taken and that it was effective.

N If you find an NC on a follow up audit that is unrelated to the NCR, what do you do about it?

A File a QSDN into CAS.

Interview with 3rd Auditor

N What is your background?

A Told about training and work experience which included other forms of auditing.

N What is the Quality Policy?

A Stated the policy.

N How do you apply the quality policy to your job in accounting?

A Follow documented procedures.

N Who is the management Rep?

A Mr. Schwinghamer.

Elements: 4.14, 4.17, NCR Closure Verification Review

Note: No interviews at this time. Auditor will review the corrective actions of the findings from the pre-assessment audit. Location: 4203/1201.

Also, the escort and the auditor were looking at the written NCRs that I could not see so for much of the conservation I did not understand exactly what the subject was. I toke notes where I had enough of an understand to do so.

N What were you looking for when audited the TA database?

A After looking into the situation I found that the database was out of scope.

N You have a nice database used to control the TAs but no procedures to control the database. You should have procedures even if the contractor performs the work.

A We should talk to ????? (person reference in NCR).

N So, this is out of scope. (talking about one of the NCRs for pre-assessment audit not sure of number)

A I was told that this is and it seems to make since.

Auditee ????? joins

N Looking at the TA for X34, the user didn't have procedures. The NASA user should have procedures for operating the TA database.

A The developers has provided instruction and username/password access to this database for one person.

Other conservation about the database and instruction on how to use it.

N Great, no problem.

Auditee ????? exits

N Can we take a look at the web based document control system? Moves to PC.

A Auditor is walked through the Document Library and some of the strong points are covered with respect to signing and reviewing the documents. (good work ?????)

N Looks good, I like it.

N Can you show me some Level 4 documents.

A Auditor is shown how to access Level documents. A Level 4 Master List is shown.

N Lets take a look at that document.

A The selected document is displayed on the screen

N No, no need to print it, I would like to take a look at the history log page.

N Looks good.

Moves back to table.

N After reading some more of the NCR closures, OK! This is the NCR that covered an access to document server problem.

N Lets talk about control of this document server.

A Explains what was done to ensure control of document on that server.

N Looks good.

N Looking at this NCR, what have you done about changing quality requirements on the fly after the fact.

A We didn't change the requirements we corrected them. The initial requirements were in error.

N Were you following the procedures when you changed the requirements, was Quality present when the requirements were changed?

A No but it was such a gross error. The requirements were just wrong.

N What building was that in?

A I thank the building was 4471 but the paper work is in 4201.

N If there is some kind of purchasing problem, does it role over into the corrective action system?

A You would need to talk to someone from Purchasing for that.

After some time looking at the NCR closures.

N On customer surveys, how often do you do surveys?

A I don't know but we can get someone from Quality.

Calls in an auditee from Quality

A We have a BOA that we do once every year but since some of the companies will only do work for the Center once every 3 or more years we only survey companies that have that have not been surveyed within the last year on a as needed basis. All BOA's that perform work would have to have been surveyed within the last year before they would be allowed to perform work.

Auditee from Quality exists.

N For NCR #23, how do you handle sketches?

A Well, we are not going to use sketches that much any more but I can show you the text in the document that coves sketches.

N Are you going to have revisions on sketches?

A No.

N I would like to see the work instructions for using the database for Award Fees.

A I saw the instructions and they seem to be very comprehensive and easy to follow, I don't know why did didn't include a copy in this package.

N Is the provider performance and award free database the same database?

A No.

N Can I see GP OWI-008?

A Rev. B of document found on the computer.

N OK. Good.

A Owner of the award free database instructions call. Instructions can not be copied or removed form office. If you come to this office you can take a look at the instructions. (Planned to do after lunch)